

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**☒ Declaration
Submitted
With Initial
Filing

OR

☐ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

0583P48US01

First Named Inventor

Nimal SENARATH et al

COMPLETE IF KNOWN

Application Number

Filing Date

concurrently herewith

Art Unit

Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

BEAM WOBBLING FOR INCREASED DOWNLINK COVERAGE AND CAPACITY*(Title of the Invention)*

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT InternationalApplication Number and was amended on (MM/DD/YYYY) (If applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed		Certified Copy Attached?	
			Yes	No	Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

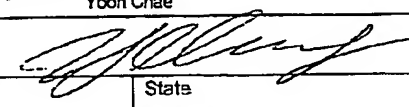
Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number: 20779 OR <input type="checkbox"/> Correspondence address below			
Name			
Address			
City		State	ZIP
Country	Telephone	Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Nimal Gamini		Family Name or Surname SENARATH	
Inventor's Signature <i>[Signature]</i>		Date X 24-09-2003	
Residence: City Nepean	State Ontario	Country Canada	Citizenship Australia
Mailing Address 46, Maple Stand Way			
City Nepean	State Ontario	ZIP K2G 6P5	Country Canada
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Yoon Chae		Family Name or Surname CHEONG	
Inventor's Signature <i>[Signature]</i>		Date X	
Residence: City Kanata	State Ontario	Country Canada	Citizenship Canada
Mailing Address 294 Knudson Dr.			
City Kanata	State Ontario	ZIP K2K 2P1	Country Canada
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

PTO/SB/01 (06-03)

Approved for use through 07/31/2003. OMB 0851-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number: 20779		OR <input type="checkbox"/> Correspondence address below	
Name			
Address			
City		State	ZIP
Country	Telephone	Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Nimal		Family Name or Surname SENARATH	
Inventor's Signature X		Date X	
Residence: City Nepean	State Ontario	Country Canada	Citizenship Australia
Mailing Address 46, Maple Stand Way			
City Nepean	State Ontario	ZIP K2G 6P5	Country Canada
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Yoon Chae		Family Name or Surname CHEONG	
Inventor's Signature X 		Date X Sept. 23, 2003	
Residence: City Kanata	State Ontario	Country Canada	Citizenship Canada
Mailing Address 294 Knudson Dr.			
City Kanata	State Ontario	ZIP K2K 2P1	Country Canada
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

[Page 2 of 2]

PTQ/S9/02A (10-00)

Approved for use through 10/31/2002. OMB 0851-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1985, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1
--------------------	--

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Shalini Given Name		PERIYALWAR Family Name or Surname	
Inventor's Signature: X <i>Shalini</i>		Date: X Sep 30, 2003	
Nepean Residence: City	Ontario State	Canada Country	Canada Citizenship
88 Summerwalk Place Mailing Address			
Mailing Address			
Nepean City	Ontario State	K2G 5Y4 ZIP	Canada Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Robert Given Name		MATYAS Family Name or Surname	
Inventor's Signature: X		Date: X	
Ottawa Residence: City	Ontario State	Canada Country	Canada Citizenship
6 Woodfern Court Mailing Address			
Mailing Address			
Ottawa City	Ontario State	K2H 8Y9 ZIP	Canada Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name: Shalini		Family Name or Surname: PERIYALWAR	
Inventor's Signature: <i>[Signature]</i>		Date: <i>[Signature]</i>	
Nepean Residence: City	Ontario State	Canada Country	Canada Citizenship
88 Summerwalk Place Mailing Address			
Mailing Address			
Nepean City	Ontario State	K2G 5Y4 ZIP	Canada Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name: Robert		Family Name or Surname: MATYAS	
Inventor's Signature: <i>Robert Matyas</i>		Date: <i>24 Sept. 103</i>	
Ottawa Residence: City	Ontario State	Canada Country	Canada Citizenship
6 Woodfern Court Mailing Address			
Mailing Address			
Ottawa City	Ontario State	K2H 8Y9 ZIP	Canada Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name:		Family Name or Surname:	
Inventor's Signature:		Date:	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PATENT/DOCKET NO. 0583P48US01
CUSTOMER NO. 20779

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of: Nimal SENARATH	§	Attorney Docket No. <u>0583P48US01</u>
et al	§	
Serial No.: n/a	§	
	§	
Filed: Herewith	§	Group Art Unit: n/a
	§	
Title: BEAM WOBBLING FOR	§	
INCREASED DOWNLINK	§	
COVERAGE AND CAPACITY	§	Examiner: n/a

Commissioner for Patents
Washington, D.C. 20231

POWER OF ATTORNEY FOR
PATENT APPLICATION

Nortel Networks Limited, a Canadian corporation having principal offices at:

**2351 Boulevard Alfred-Nobel
St. Laurent, Quebec H4S 2A9, Canada**

the owner by assignment of the entire right, title and interest to the invention for **BEAM WOBBLING FOR INCREASED DOWNLINK COVERAGE AND CAPACITY**, by Nimal SENARATH; Yoon Chae CHEONG; Shalini PERIYALWAR and Robert MATYAS in and to the application for patent and any Letters Patent, whether domestic or foreign, that may issue thereon, hereby appoints the following attorneys and/or agents to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

☒ **X**

Practitioners at Customer Number

20779

its attorneys with full power of substitution and revocation, to prosecute all domestic and foreign patent applications, including PCT and EPO filings, relating to said invention and to transact all business connected therewith, including signing of all papers on its behalf and making alterations and amendments.

From #	072544
To #	072544
Co./Dept.	
Phone #	
Fax #	613 563 9237

Page 2

Please address all correspondence and telephone calls regarding this application to:

Dennis R. Haszko,
SHAPIRO COHEN,
P.O. Box 3440, Station D,
Ottawa, Ontario, K1P 6P1,
Canada.

The undersigned is the representative for the Assignee of the entire right, title, and interest in the patent application identified above, and is authorized to act on behalf of the Assignee.

NORTEL NETWORKS LIMITED



Name: Paul C. Hashim

9/30/2003
DateTitle: Lead IP Counsel